

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

PCT/FR03/01931

International Application No.

24 JUNE 2003

(24/06/03)

International Filing Date

NATIONAL INSTITUTE FOR INDUSTRIAL PROPERTY  
PCT INTERNATIONAL APPLICATION

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) 5492

Box No. I TITLE OF INVENTION

Microcapsules for the delayed and controlled release of perindopril

Box No. II APPLICANT

☐ This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

LES LABORATOIRES SERVIER  
12, Place de La Défense  
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[FRANCE]

Telephone No.  
01.55.72.60.00

Facsimile No.  
01.55.72.72.13

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:  
FR

State (that is, country) of residence:  
FR

This person is applicant  
for the purposes of:

☐ all designated  
States

☒ all designated States except  
the United States of America

☐ the United States  
of America only

☐ the States indicated in  
the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

HUET DE BAROCHEZ, Bruno  
38, rue des Grands Champs  
45140 INGRE  
FRANCE

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only (If this check-box  
is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
FR

State (that is, country) of residence:  
FR

This person is applicant  
for the purposes of:

☐ all designated  
States

☐ all designated States except  
the United States of America

☒ the United States  
of America only

☐ the States indicated in  
the Supplemental Box

☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf  
of the applicant(s) before the competent International Authorities as:

☐ agent

☒ common  
representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

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Agent's registration No. with the Office

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

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